PTO/SB/17 (02-07)

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der the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/724,015-Conf. #7556 pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMIT November 26, 2003 Filing Date First Named Inventor Alexei A. Erchak For FY 2007 **Examiner Name** M. P. Hodges Applicant claims small entity status. See 37 CFR 1.27 2879 Art Unit **TOTAL AMOUNT OF PAYMENT** L0655.70027US01 480.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 200 Design 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 200 100 **Provisional** 0 n 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** \_ - 70 = 3 x 25.00 = 75.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) Fee (\$) x - 5 = HP = highest number of independent claims paid for, if greater than 3. If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2252 Extension for response within second month 225.00 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY Registration No. Signature 46.324 Telephone (617) 646-8000 Name (Print/Type) April <u>70</u>, 2007 Robert H. Walat Date

Certificate of Mailing Under 37 CFR 1.8(a)  I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Dated:   Signature:   Signature:



Docket No.: L0655.70027US01

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Alexei A. Erchak

Serial No.:

10/724,015

Confirmation No.:

7556

Filed:

November 26, 2003

For:

LIGHT EMITTING DEVICES

Examiner:

M. P. Hodges

Art Unit:

2879

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

## TRANSMITTAL LETTER

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- Amendment;
- Petition for Two (2) Month Extension of Time;
- 3. Information Disclosure Statement;
- PTO Form 1449 including cited references;
- Fee Transmittal; and
- Return Receipt Postcard.

Please charge our Deposit Account No. 23/2825 in the amount of \$480.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 23/2825, under Docket No. L0655.70027US01. A duplicate copy of this paper is enclosed.

Dated: April 20, 2007

Respectfully submitted,

Robert H. Walat

Registration No.: 46,324

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